

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------------|-----------------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>JA</i> | <i>69976</i> | <i>11/22/00</i> |
| RESPONSE FORMALITY REVIEW | | | <i>11/29/00</i> |
| | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
|----------------|------|
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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